

Titre :

Access to supervised injection services during hospitalization: learning from Canadian practices.

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Objectifs / Matériels et méthodes / Résultats et conclusions :

Inpatient treatment in addiction medicine is recommended for patients in precarious situations, with physical and psychological comorbidities, and other complex situations. Substance use inside the inpatient perimeter is one of the leading causes of discharge against medical advice. Access to harm reduction services and safe use are one of the major challenges of such units. A lot of data supports the efficacy of supervised injection services (SIS), but there is a lack of research regarding the interaction between SIS and inpatient treatment centers (ITC). Our work will investigate the support SIS can offer to patients in ITC. A review of the literature showed low power articles reporting local experimentations. We were able to visit these services and gather their feedback. We investigated three Canadian experimentations and services trying to address this matter. We describe three different kinds of interaction of SIS and ITC. The first example is a SIS close to a hospital, St Paul Overdose Prevention Site (OPS) in Vancouver, British Columbia, Canada. This OPS is next to the hospital and allows patients to use in a safe environment, close to the hospital where they receive medical care. A mobile SIS able to meet with users next to an ITC, the reconverted ambulance of L'Anonyme, in Montreal, Quebec, Canada. We finally visited a SIS inside of an ITC, Dr Peter Centre's OPS, in Vancouver. These services were able to meet legal obligations while also meeting public health objectives. All these services could be implemented in our practices in most countries in Europe and help vulnerable patients in their access to care.

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